## M1900001526

(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 631015 8128292						
AUTHORIZATION: SAN COLLEGE						
COST LIMIT : \$ 25 0.0						
ORDER DATE : April 3, 2023						
ORDER TIME : 1:36 PM						
ORDER NO. : 631015-218						
CUSTOMER NO: 8128292						
CHANGE OF AGENT						
NAME: INDUSTRIOUS TPA 1600 EAST 8TH AVENUE LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY  XX PLAIN STAMPED COPY						
CONTACT PERSON: Alexxis Weiland-sorenson						

EXAMINER'S INITIALS:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. ì	Name of the limited liability company:INDUSTRIOUS	S TPA 1600	EAST 8TH AVENUE LLC			
2. (a	215 PARK AVE S EL 13TH	(b)	215 PARK AVE S. FL 13	TH		
2. (6	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0).	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  NEW YORK, NY 10003			
	NEW YORK, NY 10003					
	08/05/2019	М	19000007526			
3.	Date of filing/registration in Florida	4.	Document num	ber		
5. (a	National Registered Agents, Inc.			- 2		
5. (a)	Registered Agent and Registered Office shown on the records of	ept. of State;	<b>623</b>			
	1200 SOUTH PINE ISLAND ROAD		2023 APR SECRETA	17		
	Registered Office Address (MUST BE FLORIDA STREET		25 <u>2</u>	- 25 45		
					7	
	PLANTATION	33324		AH 10: 23		
	r	'L	<del></del> .	$\sim$		
	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company  NEW Registered Office Address:		<del></del> -			
	1201 Hays Street					
	Tallahassee	32301				
chang agent was/v	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited layere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	e registered iability composition	office and the business of pany, it is hereby confirm ed liability company or as	ffice of the registero led that the change(	ed s)	
	/S/ Jill Cilmi		Jill Cilmi, Authorized Representative			
Sign	nature of a member or authorized representative of a member	<del></del> -	Printed or typed n	ame of signee		
provi the or to me notifi	why accept the appointment as registered agent and ages sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address. It eat in writing of this shange ture of Registered Agent acce E. Kirby, Asst. Vice President	gree to act in e performanc ed for in Cha hereby conf	this capacity. I further a ce of my duties, and I am upter 605, F.S. Or, if this irm that the limited liabil	igree to comply witi familiar with and a document is being ity company has be	h the eccept filed en	

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